10/671,709

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Substitute for Form PTO-875 Application or Docket Number												
CLAIMS AS FILED - PART I (Column 1) (Column 2)						-	SMALL	ENTITY	OR	OTHER THAN SMALL ENTITY		
L.	FOR	NUM	NUMBER FILED NUM		BER EXTRA		RATE	FEE		RATE	FEE	
BASIC FEE (37 OFR 1.18(a)) TOTAL CLAIMS				1		5	OR		s			
(37	CFR 1.16(c))		minus 20 = •			1	xs =		OR	x s =	<u> </u>	
	DEPENDENT CLA CFR 1.16(b))	MS	minus 3 = •			1	x s=		1			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						1	+: -		OR OR	X \$=		
* If the difference in column 1 is less than zero, enter "0" in column 2.						j	TOTAL		OR	TOTAL		
	. c	LAIMS AS AN	ENDEC	– PART II				IOIAL	L			
1	Jalon								OTHE	R THAN		
-	15100	(Column 1)		(Column 2)	(Column 3)	9 ;	SMALL E	NTITY	OR		ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total (37 CFR 1,18(c))	.48	Minus	-98			xs		OR .	xs =	112	
	Independent (37 CFR 1.18(b))	8	Minus	B			x s		OR	xs =	·	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4))						+;		OR	+s =		
12/2/01							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
	14 110	(Column 1)		(Column 2)	(Catumn 3)		•		•			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total (37 CFR 1.10(c))	47	Minus	CY	*		x s=		OR	x s =		
	Independent (37 CFR 1,18(b))	B	Minus	4	3		x \$=		OR	x s_ =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ \$=		OR	+s_ =		
						_	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)		. -			•		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total (37 CFR 1,18(c))	•	Minus	-	=	ſ	x s=		OR	x s =		
	Independent (37 CFR 1,18(b))	•	Minus	400		Ī	x s =		OR	x \$=		
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))					ſ	+s=		OR	+ 5=		
									OR	TOTAL ADD'L FEE		
•	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTC-9199 and select option 2.

